

Angels Gun Club Inc.
P.O. Box 842
Angels Camp, CA 95222

APPLICATION FOR MEMBERSHIP
(PLEASE PRINT)

Name _____

Mailing Address _____

Physical Address _____

City _____ Zip _____

Email address _____

Date of Birth _____ Telephone _____

- Are you a citizen of the United States? Y _____ N _____
- Can you own a firearm? Y _____ N _____
- Are You and NRA member Y _____ N _____

This form is only for registering for membership. Names will be placed on a **waiting list** and you will be notified when the Angels Gun Club is adding new members. Initial fee is \$250 which includes the \$100 annual membership for current year. You will be notified when you being considered as a new member and you will then be required to meet the Board of Directors for final approval and payment of dues. Fees are due when you meet with a Director.

Signature of Applicant _____

Sponsoring Member _____

Sponsoring Member Signature _____

Date Submitted _____

The Angels Gun Club Board of Directors have sole discretion to approve any new members.

AGCsecretary1@comcast.net

(Time of Interview)

- I have been given a copy of the Angels Gun Club By-Laws
- I have signed a "Hold Harmless Agreement".

DO NOT WRITE BELOW THIS LINE

_____ BOD Approval
Date

_____ Application to Director
Date

_____ Interviewed by _____
Date